

# **TOWN OF DAVIE TOWN COUNCIL AGENDA REPORT**

**TO:** Mayor and Councilmembers

**FROM/PHONE:** Bruce Bernard/797-1240

**SUBJECT:** Resolution

**AFFECTED DISTRICT:** Townwide

**TITLE OF AGENDA ITEM:** A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA,  
APPROVING AN AUTHORIZED AGENT FOR DISASTER MITIGATION RECOVERY

**REPORT IN BRIEF:** Resolution for disaster event in relation to personnel, equipment and debris removal operations. Resolution will meet FEMA guidelines for reimbursement procedures.

**PREVIOUS ACTIONS:** Not applicable

**CONCURRENCES:** Ashbritt contract already in place.

**FISCAL IMPACT:**

Has request been budgeted? FEMA reimbursable

If yes, expected cost:

Account Name:

**RECOMMENDATION(S):** Motion to approve the resolution.

**Attachment(s):**

Resolution

Memo

RESOLUTION \_\_\_\_\_

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, APPROVING AN  
AUTHORIZED AGENT FOR DISASTER MITIGATION RECOVERY.

WHEREAS, the Town of Davie, hereinafter referred to as "The Town," could be effected by a  
disaster event; and

WHEREAS, the Town can be a subgrantee under any presidential declaration of disaster by  
FEMA; and

WHEREAS, the Town is responsible for the recovery coordination for any disaster event; and

WHEREAS, the Town must manage special contracts, account for and administrate special  
disaster related grants and/or advances from state and federal funding sources; and

WHEREAS, this coordination responsibility must be a high level of authority in The Town  
administration;

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE,  
FLORIDA.

SECTION 1. The Town Council does hereby direct the Town Administrator to name the Town  
of Davie Finance Director as its authorized agent for disaster mitigation funding recovery from any  
declared disaster.

SECTION 2. Once designated, this person may not re-delegate this authority and responsibility  
without concurrence of the Town Administrator and/or Town Council.

SECTION 3. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 2004.

\_\_\_\_\_  
MAYOR/COUNCIL MEMBER

ATTEST:

\_\_\_\_\_  
TOWN CLERK

APPROVED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 2004.

# MEMO of RECORD

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DATE: Dated following Governing Body adoption of applicable resolution

SUBJECT: Temporary Hire – Health & Safety / Debris Eligibility Inspector

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As a direct result of the **Name of Disaster** on **Date of Incident**, the position of a Health & Safety / Debris Eligibility Inspector became a necessary component of the **City's** contracted Storm Debris Removal project. As authorized by the **City of Somewhere Name of Governing Body** on **Date of Board Meeting**, I have hired **Name of Temporary Hire** to fill this position effective **Date** for a period not to exceed 90 days.

I have tasked **Name of Temporary Hire** to conduct inspections of storm-generated debris on private property within the **City of Somewhere**, as identified on the Right-of-Entry (ROE) forms submitted by residents to the **City**.

I have directed **Name of Temporary Hire** to conduct the ROE inspections in such a manner as to ensure that all debris removed from private property meets the eligibility criteria, as found in the Public Assistance Guide - FEMA 286, dated September 1996, to include, but not limited, to the following:

- Eliminate immediate threats to lives, public health and safety;
- Eliminate immediate threats of significant damage to improved public or private property; or,
- Ensure economic recovery of the affected community to the benefit of the community-at-large;
- Additional criteria as directed by the **City**.

I have further directed **Name of Temporary Hire** to review and follow the recommended ROE Documentation Procedures in coordination with all other parties involved with the debris removal project. Furthermore, I have authorized payment to **Name of Temporary Hire** for Inspection services at the rate of \$\_\_\_\_\_ per \_\_\_\_\_ (i.e. Inspection, hour, day).

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Name of Applicant's Authorized Agent – Title

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Date

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